

APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date:: April 23, 2004

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

**Computer Readable Form
(CFR)?::**

Number of Copies of CFR::

Title:: MODULAR LOW FRICTION SPINDLE ASSEMBLY

Attorney Docket Number:: 29953-190098

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure:: 2

Total Drawing Sheets:: 2

Small Entity?::

Latin Name::

Variety Denomination Name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship:: U.S.A.
Country:: U.S.A.
Status:: Full Capacity
Given Name:: Russell
Middle Name::
Family Name:: Varone
Name Suffix::
City of Residence:: Red Lion
State or Province of Residence:: PA
Country of Residence:: U.S.A.
Street of Mailing Address:: 911 Bellview Court
City of Mailing Address:: Red Lion
State or Province of Mailing Address:: PA
Country of Mailing Address:: U.S.A
Postal or Zip Code of Mailing Address:: 17356

Applicant Authority Type:: Inventor
Primary Citizenship::
Country::
Status:: Full Capacity
Given Name::
Middle Name::
Family Name::
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of Mailing Address::

City of Mailing Address::

**State or Province of Mailing
Address::**

Country of Mailing Address::

**Postal or Zip Code of Mailing
Address::**

Applicant Authority Type:: Inventor

Primary Citizenship::

Country::

Status:: Full Capacity

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

**State or Province of Mailing
Address::**

Country of Mailing Address::

**Postal or Zip Code of Mailing
Address::**

Applicant Authority Type:: Inventor

Primary Citizenship::

Country::

Status:: Full Capacity

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

**State or Province of Mailing
Address::**

Country of Mailing Address::

**Postal or Zip Code of Mailing
Address::**

Correspondence Information

Correspondence Customer Number:: 26694
Phone Number:: (202) 344-4000
Fax Number:: (202) 344-8300
E-Mail Address:: kghaddaway@venable.com

Representative Information

Representative Customer Number:: 26694

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
	Continuation of		
	Continuation of		
	Continuation of		
	Continuation of		

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: GRAHAM PACKAGING COMPANY, L.P.
Street of Mailing Address:: 2401 Pleasant Valley Road
City of Mailing Address:: York
State or Province of Mailing Address:: PA
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 17402